



Bib Data Sheet

CONFIRMATION NO. 6319

| | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|------------------------------------|
| SERIAL NUMBER 10/600,487 | FILING OR 371(c) DATE 06/20/2003 RULE | CLASS 340 | GROUP ART UNIT 2612 | ATTORNEY DOCKET NO. CS21975RA/10-156 | |
| APPLICANTS Michael D. Kotzin, Buffalo Grove, IL; | | | | | |
| ** CONTINUING DATA ***** | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/06/2003 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance | | STATE OR COUNTRY IL | SHEETS DRAWING 3 | TOTAL CLAIMS 23 | INDEPENDENT CLAIMS 3 |
| Verified and Acknowledged Examiner's Signature <u>EA</u> Initials | | | | | |
| ADDRESS 51874 | | | | | |
| TITLE METHOD AND APPARATUS USING BIOMETRIC SENSORS FOR CONTROLLING ACCESS TO A WIRELESS COMMUNICATION DEVICE | | | | | |
| FILING FEE RECEIVED 1204 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |